

DECLARATION AND POWER OF ATTORNEY

Original Application

As below named inventor, I declare that I have reviewed and understand the contents of the specification, including the claims, as amended by any amendment specifically referred to in this Declaration, that the information given herein is true, that I believe that I am the original, first, and sole (if there is only one inventor name) /or joint inventor of the invention entitled:

A 3.5 Inch Hot-Swappable Docking Module

which is described and claimed in:

X the attached specification, or
___ the specification in application Serial No. _____, filed _____,
amended _____

that I acknowledge a duty to disclose information I am aware of which is material to the examination of this application, in accordance with 37 C.F.R. Section 1.56, that I do not know and do not believe that the same was ever known or used in the United States of America before my invention thereof or patented or described in any printed publication in any country before my invention thereof, or more than one year prior to this application, or in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months prior to this application and that as to applications for patent or inventor's certificate filed by me or my legal representatives or assigns in any country foreign to the United States of America, the earliest filed foreign application(s) filed within twelve months prior to the filing date of this application and all foreign applications filed more than twelve months prior to the filing date of this application, if any, are identified below.

CHECK APPROPRIATE BOX:

X No earlier-filed foreign applications.
___ Required information as to related foreign applications filed prior to filing date of this application is presented on page 4 attached hereto and made a part hereof.
___ Applicant hereby claims priority based upon an earlier-filed application, Application No. _____ under Paris Convention.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

NAME
Shaoyi Alexander Liao

REGISTRATION NO.
39,463

SEND CORRESPONDENCE TO:

DIRECT TELEPHONE CALLS TO:

S. Alex Liao
Attorney At Law
12 S. First St., Suite 905
San Jose, CA 95113

S. Alex Liao
Tel: (408) 280-1999
Fax: (408) 280-0112

FULL NAME OF INVENTOR (1)	LAST NAME Petrov	FIRST NAME Peter	MIDDLE NAME D.
RESIDENCE & CITIZENSHIP	CITY Sunnyvale	FOREIGN COUNTRY USA	COUNTRY OF CITIZENSHIP Bulgaria
POST OFFICE ADDRESS	STREET c/o DZU Technology Corporation 565 E Arques Ave., Suite 2	CITY Sunnyvale	STATE OR COUNTRY/ZIP CODE CA 94086

FULL NAME OF INVENTOR (2)	LAST NAME Kalintchev	FIRST NAME Stefan	MIDDLE NAME H
RESIDENCE & CITIZENSHIP	CITY St. Zagora	FOREIGN COUNTRY Bulgaria	COUNTRY OF CITIZENSHIP Bulgaria
POST OFFICE ADDRESS	STREET c/o DZU Technology Corporation 565 E Arques Ave., Suite 2	CITY Sunnyvale	STATE OR COUNTRY/ZIP CODE CA 94086

FULL NAME OF INVENTOR (3)	LAST NAME Parushev	FIRST NAME Ivan	MIDDLE NAME M
RESIDENCE & CITIZENSHIP	CITY St. Zagora	FOREIGN COUNTRY Bulgaria	COUNTRY OF CITIZENSHIP Bulgaria
POST OFFICE ADDRESS	STREET c/o DZU Technology Corporation 565 E Arques Ave., Suite 2	CITY Sunnyvale	STATE OR COUNTRY/ZIP CODE CA 94086

FULL NAME OF INVENTOR (4)	LAST NAME Dimov	FIRST NAME Ivan	MIDDLE NAME G
RESIDENCE & CITIZENSHIP	CITY St. Zagora	FOREIGN COUNTRY Bulgaria	COUNTRY OF CITIZENSHIP Bulgaria
POST OFFICE ADDRESS	STREET c/o DZU Technology Corporation 565 E Arques Ave., Suite 2	CITY Sunnyvale	STATE OR COUNTRY/ZIP CODE CA 94086

DZU TECHNOLOGY

4 8 749 9627

P.03

US Exp Mail No.: EU180248737US
Attorney Docket No.: P03016

FULL NAME OF INVENTOR (5)	LAST NAME Dimitrov	FIRST NAME Lubomir	MIDDLE NAME T
RESIDENCE & CITIZENSHIP	CITY Sl. Zagora	FOREIGN COUNTRY Bulgaria	COUNTRY OF CITIZENSHIP Bulgaria
POST OFFICE ADDRESS	STREET c/o DZU Technology Corporation 565 E Arques Ave., Suite 2	CITY Sunnyvale	STATE OR COUNTRY/ZIP CODE CA 94086

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize that validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR (1)	<i>Peter Petrov</i>
DATE	11/12/2003
SIGNATURE OF INVENTOR (2)	<i>T. Porzushov</i>
DATE	12. November 2003
SIGNATURE OF INVENTOR (3)	<i>T. Porzushov</i>
DATE	12. November, 2003
SIGNATURE OF INVENTOR (4)	<i>[Signature]</i>
DATE	12. November. 2003
SIGNATURE OF INVENTOR (5)	<i>[Signature]</i>
DATE	12. November. 2003